



Effective on 12/08/2004

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,050.00

Complete if Known

Application Number	10/049,731
Filing Date	February 15, 2002
First Named Inventor	Pallet et al.
Examiner Name	S. Mark Clardy
Art Unit	1616
Attorney Docket No.	514413-3915

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-0320 Deposit Account Name: Frommer Lawrence & Haug LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit and overpayments

WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
	Fee(\$)	Small Entity Fees(\$)	Fee(\$)	Small Entity Fees(\$)	Fee(\$)	Small Entity Fees(\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

	Fee(\$)	Small Entity Fees(\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
_____ -20 or HP =	<u>9</u> x	<u>50</u> =	<u>450</u>	Fee (\$) Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20				
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
_____ -3 or HP =	<u>3</u> x	<u>200</u> =	<u>\$600</u>	
HP = highest number of total claims paid for, if greater than 3				

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 or small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 =	_____ / 50 =	_____ (round up to a whole number) x	_____ =	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity)

Other: _____

SUBMITTED BY

Signature	Howard C. Lee	Registration No. (Attorney/Agent)	48,104	Telephone	(212) 808-0800
Name (Print/Type)	Howard C. Lee	Date	June 7, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1540. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.



PATENT
514413-3915

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Pallet et al.
Serial No. : 10/049,731
For : **NEW HERBICIDAL COMPOSITIONS**
Filed : February 15, 2002
Examiner : S. Mark Clardy
Art Unit : 1616
Confirmation No. : 4744

745 Fifth Avenue
New York, NY 10151

First Class Mail

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450**, on November 12, 2004

Howard C. Lee, Reg. No. 48,104
Name of Applicant, Assignee or Registered Representative

Howard C. Lee
Signature

June 7, 2005

Date of Signature

AMENDMENT TO THE CLAIMS

Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This amendment is being presented to copy claims 1-9 of U.S. Patent 6,746,987. A response to the Examiner's communication of 7 April 2005 will be forthcoming in a later response. If any fee occasioned by this paper may be charged, or overpayment credited, to Deposit Account No. 50-0320.

06/13/2005 GWORDOF1 00000030 500320 10049731

01 FC:1201 600.00 DA
02 FC:1202 450.00 DA